

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee		<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00111278	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Eu Services		Date MM / DD / YYYY 10 / 10 / 2006	
Mailing Address P.O. Box 75241		Amount 31911.60	
City State Zip Code Baltimore MD 21275-5241		Transaction ID: E9027D3E96B284084A32	
Purpose of Expenditure S2MO00353 Print - EST Print32		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JAMES MATTHES TALENT		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 64489.11		2006 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee National Right To Life Committee		Date MM / DD / YYYY 10 / 11 / 2006	
Mailing Address 512 10th Street, N.W.		Amount 197.00	
City State Zip Code Washington DC 20004		Transaction ID: E8F45CBF31535430D98D	
Purpose of Expenditure S6MN00275 Ad		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: MARK RAYMOND KENNEDY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8110.89		2006	
(a) SUBTOTAL of Itemized Independent Expenditures .....		197.00	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Carol Tobias Signature		Date MM / DD / YYYY 12 / 02 / 2009	